

In re application of: SEAKINS ET AL.

Serial No.: 09/808,567

Filed: March 14, 2001

For: **BREATHING ASSISTANCE APPARATUS**BOX: RCE
ASSISTANT COMMISSIONER FOR PATENTS
Alexandria, VA 22313-1450

Sir:



Certificate of Mailing by "Express Mail"	
Mailing Label Number	EL966274322US
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I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office Box Addressee" service under 35 CFR 1.10 on the date indicated above and is addressed to the Assistant Commissioner For Patents, Alexandria, VA 22313-1450.	
 Tiffany B. Sexton	

Transmitted herewith is a Request for Continued Examination (RCE) for the above-identified application.

The filing fee has been calculated as shown below:

	(Col. 1)		(Col. 2)	(Col. 3)
	Claims Remaining After Amendment		Highest No. Previously Paid for	Present Extra
TOTAL	* 45	MINUS	** 63	0
INDEP.	* 4	MINUS	** 4	0
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				

SMALL ENTITY	
Rate	Addit. Fee
x 9 =	\$.00
x 43 =	\$.00
+ 145 =	\$.00
TOTAL	
ADDIT. FEE	\$.00

OR

OTHER THAN A SMALL ENTITY	
Rate	Addit. Fee
x 18 =	\$.00
x 86 =	\$.00
+ 290 =	\$.00
TOTAL	
	\$.00

OR

- * If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
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- ☐ Please charge my Deposit Account No. 20-1495 in the amount of \$ _____. A duplicate copy of this sheet is enclosed.
- ☒ A check in the amount of \$750.00 to cover the RCE fee.
- ☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 20-1495. A duplicate copy of this sheet is enclosed.
- ☒ Any filing fees required under 37 CFR 1.16 for the presentation of extra claims.
- ☒ Any patent application processing fees under 37 CFR 1.17

Dated: November 12, 2003

Raiford A. Blackstone, Reg. No. 25,156
 Linda L. Palomar, Reg. No. 37,903
 Attorney of Record

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